File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. FLORIDA DEPARTMENT OF STATE LIMITED LIABILITY COMPANY FILED Katherine Harris ANNUAL REPORT Secretary of State 1999 DIVISION OF CORPORATIONS 99 MAR 17 AM 8: 19 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE SEGRETARY OF STATE. TALLAHASSEE, FLORIDA **DOCUMENT # M98000000633** 1a. Principal Place of Business Address ASBURY TAMPA MANAGEMENT L.L.C. 3800 WEST HILLSBOROUGH AVENUE 3800 WEST HILLSBOROUGH AVENU TAMPA FL 33684 TAMPA FL 33684 2 Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified | 3a. State of Formation 06/17/1998 DE Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 59-3512657 Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Zin Country Country \$8.75 Additional Fee Required 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33324 Suite, Apt. #, etc. City Zip Code 9. Pursuant to the provisions of Sections 608.416 and 608.508. Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. Thereby accept the appointment as registered agent, and accept the obligations. DATE SIGNATURE (Registered Agent Accepting Appointment) (NOTE Registered Agent signature required whomeins) rings 10. Title **Business Street Address** City, State and Zip Code Managing Members/Managers MGRM ASBURY AUTOMOTIVE, L.P. ONE ROCKEFELLER PLAZA, 32N NEW YORK NY edanos821028----n3/26/99--01134**--**003 ****188.75 ****188.79 32-24-99 11. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (i). Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes, and that my name appears in Block 10, or on an attachment with an address. SIGNATURE: J. I. Wooley 3/10/99 (813) <u>621-7747</u>

OF SIGNING MANAGING MEMBER OR MANAGER.

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